

Application or Docket Number

1 908 92 001024305

**CLAIMS AS FILED - PART I**

TOTAL CLAIMS		25	(Column 1)
FOR	NUMBER FILED	NUMBER EXTRA	
TOTAL CHARGEABLE CLAIMS	25	5	
INDEPENDENT CLAIMS	4	1	
MULTIPLE DEPENDENT CLAIM PRESENT	minus 3 =	1	

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

AMENDMENT A		(Column 1)	(Column 2)	(Column 3)
Total	*	Minus	=	
Independent	*	Minus	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	=	=	=	
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		

AMENDMENT B		(Column 1)	(Column 2)	(Column 3)
Total	*	Minus	=	
Independent	*	Minus	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	=	=	=	
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		

AMENDMENT C		(Column 1)	(Column 2)	(Column 3)
Total	*	Minus	=	
Independent	*	Minus	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	=	=	=	
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20."

SMALL ENTITY ☐ TYPE ☐ OTHER THAN SMALL ENTITY

TOTAL		OR	OR TOTAL	880
+135=		OR	+270=	
X40=		OR	X80=	80
X\$ 9=		OR	X\$18=	90
BASIC FEE	355.00	OR	BASIC FEE	710.00
RATE	FEE		RATE	FEE